ANNUAL REPORT

for the fiscal year
ending March 31, 1987

Health Services and Insurance Commission

Nova Scotia
Health Services
and
Insurance Commission
Membership
March 31, 1987

Chairman	Clemm E. Larsen Parrsboro
Vice-Chairman	Professor R.G. Murray Dartmouth
Commissioners	Jean Dobson Kentville (Retired: September 30, 1986)
	George S. Fairn Middleton
	Dr. R. John Fraser Musquodoboit Harbour (Appointed: December 1, 1986)
	C. Herbert Inness Port Medway
	Mary MacDonald New Waterford (Reappointed: December 1, 1986)
	William MacDonald Yarmouth
	Dr. D.C.T. Macintosh Halifax
	Dr. N.K. MacLennan Sydney
	Dr. Bruce Pretty Halifax
	Garth D. Pulsifer Windsor (Appointed: February 1, 1987)
	Major General George Spencer Chester (Reappointed: December 1, 1986)

Executive Director	J.G. Hare (Retired: June 30, 1986) Derek C. Dinham (Appointed: July 1, 1986)
Administrative Assistant to Executive Director	Glen McClare (Appointed: September 4, 1986)
Address:	P.O. Box 760 Halifax, Nova Scotia B3J 2V2 Telephone: 424-7733

CONTENTS

Letters of Transmittal 3, 5

Introduction 9

Highlights 1986–87 10

General Information 11

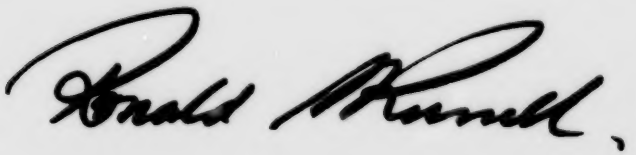
Statistical Tables 15

To The Honourable Alan R. Abraham, C.D.
Lieutenant-Governor of the Province of Nova Scotia

Sir:

I have the honour to present the Annual Report of the Nova Scotia Health Services and Insurance Commission for the fiscal year ending March 31, 1987.

Your obedient servant,



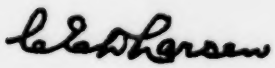
Ronald S. Russell, C.D.
Minister of Health

To The Honourable Ronald S. Russell, C.D.
Minister of Health
Joseph Howe Building
Halifax, Nova Scotia

Sir:

I have the honour to present the Annual Report of the Nova Scotia Health Services and Insurance Commission for the fiscal year ending March 31, 1987.

Respectfully submitted,



Clemm E. Larsen, C.D.
Chairman

INTRODUCTION

This is the fourteenth annual report of the Health Services and Insurance Commission to the Honourable Minister of Health and is made pursuant to Section 16(1) of the Health Services and Insurance Act.

Programs provided to residents which are the responsibility of the Commission are:

(1) Physicians' services

(2) Surgical-dental services in hospital

(3) Vision analyses by optometrists

(4) Drug program for residents 65 years of age and over

(5) Dental services for children to age 16, or for students registered with the School for the Blind

(6) Drug program for sufferers of cystic fibrosis

(7) Dental program for patients with cleft lip/cleft palate

(8) Drug program for those suffering from diabetes insipidus related to the pituitary gland

(9) Program of drugs for cancer patients

(10) Prosthetic services program.

The Commission consisted of twelve members appointed by the Lieutenant-Governor in Council. Twelve regular meetings were held by the Commission during the year. Committees of the Commission met as required throughout the year.

Maritime Medical Care continued to carry out the day-to-day administration of the various programs.

The total number of claims processed under all programs was 7,714,000, a 6.0 percent increase over those of the previous year.

Total payments increased by 8.6 percent to $243,942,591. Statistical data relating to all programs are included in the statistical section of this report. More detailed data are available on request.

HIGHLIGHTS 1986–87

1. Dr. John Fraser and Mr. Garth Pulsifer were appointed members effective December 1, 1986 and February 1, 1987 respectively.

2. Major General George Spencer and Mrs. Mary MacDonald had their appointments extended to November 30, 1989.

3. Miss Jean Dobson retired as a member of the Commission effective September 30, 1986.

4. Mr. J.G. Hare retired as Executive Director of Health Services and Insurance and Executive Secretary to the Health Services and Insurance Commission effective June 30, 1986. Mr. Derek Dinham was appointed to succeed him effective July 1, 1986.

5. Mr. Glen McClare was appointed Administrative Assistant to the Executive Director effective September 4, 1986.

6. The medical tariff increased by 2.0% effective April 1, 1986.

7. The dispensing fee for pharmacists was increased to $7.00 effective July 1, 1986.

8. A policy of Actual Acquisition Cost (A.A.C.) was implemented in the Pharmacare tariff agreement. It is the net cost to the pharmacy, based on reasonable and customary purchasing practises. Each participating pharmacy will be reimbursed only what it paid for the product. This has eliminated mark-up or buying profit in the calculation of drug costs.

9. Two inquiries were held into submission of irregular claims, one by a dentist and the other by a physician. Although violations under the Act were not found, the physician was reprimanded by the Commission and the Provincial Dental Board later recommended that the dentist undertake remedial training.

GENERAL INFORMATION

Legislation

The Health Services and Insurance Commission was established by Chapter 8 of the Statutes of Nova Scotia, 1973—the Health Services and Insurance Act.

This Act repealed the Medical Care Insurance Act and the Hospital Insurance Act. The Health Services and Insurance Act was amended by Chapter 2 of the Statutes of 1977, at which time responsibility for the hospital programs was deleted from the Commission's responsibility. The Commission continues to provide insurance coverage to Nova Scotia residents for a wide range of services provided by physicians, dentists, optometrists and pharmacists.

Effective July 1, 1984, the Health Services and Insurance Act was amended by Chapter 50 of the Acts of 1984. The effect of the amendment was to preclude billing above tariff by physicians, dentists and optometrists. The amendment also established a system of final offer arbitration for resolution of issues relating to compensation.

The Commission

The wide range of services provided to residents of Nova Scotia is administered by a Commission consisting of not fewer than 9, or more than 12, members responsible to the Minister of Health. At year end, there were 12 members, including 2 physicians nominated by the Medical Society of Nova Scotia and 2 members nominated by the Association of Health Organizations.

Each Commissioner holds office for such term as is prescribed by his or her appointment, and is eligible for reappointment, but shall not hold office for a term or terms exceeding six consecutive years. Dr. John Fraser and Mr. Garth Pulsifer were appointed as members of the Commission. Major General George Spencer and Mrs. Mary MacDonald were reappointed for a further three-year term effective December 1, 1986.

Mr. J.G. Hare retired as Executive Director and Executive Secretary to the Commission and Mr. Derek C. Dinham was appointed to replace him. Mr. Glen McClare was appointed Administrative Assistant to the Executive Director.

Responsibilities of the Commission

The Commission has the function and the power

11.(1) (a) to negotiate in good faith compensation for insured medical services between the Commission on behalf of the Province and

(i) the Society on behalf of duly qualified medical practitioners in the Province who provide insured medical services, or

(ii) a professional organization representing persons in the Province who render insured medical services and who are not duly qualified medical practitioners;

(b) to participate in any process of final offer arbitration as provided for in this Section;

(ba) to establish the tariff or tariffs of fees or other system of payment for insured medical services determined in accordance with this Section and, with the approval of the Governor in Council, to authorize payments in respect thereof;

(c) to interpret tariffs and determine their application to the assessment of claims;

(d) to conduct surveys and research in relation to services that are insured under this Act;

(e) to perform such other functions as may be assigned to it from time to time by the Governor in Council or the Minister;

(f) to do all other acts and things that the Commission considers necessary or advisable for the purpose of carrying out effectively the intent and purposes of this Act.

Funding

The funds to carry out the purposes and functions of the Commission are provided by appropriations from the Legislature, and all services are rendered without the payment of premiums or co-insurance charges imposed by the Commission or the Province.

Administration

The Executive Director, Mr. Derek C. Dinham, is responsible to the Commission for the overall direction of the plan. Maritime Medical Care is responsible for the day-to-day administration and for the assessment of claims in respect of insured services in accordance with the tariffs established by the Commission. It is also responsible for paying claims in accordance with the Act and Regulations.

Tariff Development

Under the Act, the Commission has the power and the responsibility to establish a tariff or tariff of fees, or other system of payment for insured services. In carrying out this function, it meets with the various societies and/or associations before establishing such tariffs or other method of payment, and then requests approval of the Governor in Council to make payments in respect thereof.

Tariff increases effective during 1986–87 were:

(1) medical tariff: 2% effective April 1, 1986;

(2) the professional component of the pharmacy tariff to $7.00 effective July 1, 1986.

Registration

Registration of beneficiaries is carried out by Maritime Medical Care, Inc., which is reimbursed by the Province for such services as are performed on its behalf.

Eligibility for Benefits

Eligibility for benefits for residents does not depend upon prior registration. No premiums are required. Elgibility is based on the family concept, and all unmarried dependents under the age of 18 are registered on the family's registration certificate. Persons 18 years of age are issued a separate registration card at the start of the month following the month in which they reach their eighteenth birthday.

New residents of Nova Scotia are required to register with Maritime Medical Care.

Residents of other provinces moving to Nova Scotia are provided with coverage on the first day of the third month following the month they move to Nova Scotia. Immediate coverage is available for certain special residents on arrival in Nova Scotia. Such special residents would include landed immigrants, discharged members of the Canadian Armed Forces, and returning Canadians (from abroad).

Method of Payment

The majority of payments are made directly to the provider by the Commission on behalf of the individual, although provision has been made for direct payment to the patient if the provider does not have opted-in status with the Commission. This, generally, is the case for services rendered outside Canada. Provision has been made by the Commission to permit the patient to assign the account to the provider concerned.

Payments made directly by the Commission to the provider will be in accordance with the tariffs established by the Commission. The level of payment for coverage provided on an out-of-Canada basis for physicians is based on the comparative fee in Nova Scotia, plus 75 percent of the balance.

No payments are made with respect to services provided at the request of a third party, or for services deemed medically unnecessary.

Third Party Recoveries

The Commission attempts to recover amounts paid for medical services rendered as a result of the wrongful act of third parties. This function is carried out on behalf of the Commission by the Department of Health.

During the fiscal year 1986–87, $184,455.14 in respect of medical services payments was recovered from third parties.

STATISTICAL TABLES

General

Table 1 M.S.I. Summary of Payments 16

Physicians' Services

Table 2 Payment and Utilization Summary 17

Table 3 Fee for Service Payments: Amount Paid by Type of Service 18

Table 4 Fee for Service Payments: Number of Physicians by Specialty and Payment Range 19, 20

Dental Services

Table 5 Payment and Utilization Summary 21

Table 6 Payments to Dentists by Payment Range ... 22, 23

Special Dental Programs

Table 7 Payment and Utilization Summary 24

Optometric Services

Table 8 Payment and Utilization Summary 24

Table 9 Number of Optometrists Paid, Payment Range . 25

Pharmacare Services

Table 10 Payment and Utilization Summary 26

Cystic Fibrosis and Diabetes Insipidus

Table 11 Payment and Utilization Summary 27

Prosthetic Services

Table 12 Payment and Utilization Summary 28

Table 1. M.S.I. Summary of Payments for the 12 Months Ending March 31, 1987

	1985–86	1986–87	Percentage Change
Physicians' Services			
Fee-for-Service Payments	$160,436,804	$171,354,956[1]	6.8
Salaried & Sessional Payments	6,383,718	7,158,811	12.1
TOTAL PAYMENTS FOR PHYSICIANS' SERVICES	$166,820,522	$178,513,767	7.0
Dental Services			
Insured Dental Surgical Services	$ 2,158,018	$ 2,336,770	8.3
Children's Dental Plan	11,914,707	11,680,418	−2.0
Cleft Palate & Special Programs	155,413	244,652	57.4
TOTAL DENTAL PAYMENTS	$ 14,228,138	$ 14,261,840	0.2
Optometric Services			
Optometric Plan	$ 2,735,404	$ 3,232,093	18.2
Prescription Drugs			
MSI Pharmacare	$ 40,031,392	$ 46,887,971	17.1
Cystic Fibrosis & Diabetes Insipidus	359,147	464,035	29.2
Cancer Society	55,467	85,849	54.8
Prosthetic Services	$ 451,485	$ 497,036	10.1
TOTAL MSI PAYMENTS	$224,681,555	$243,942,591	8.6
Administrative Expense, Maritime Medical Care, Incorporated	$ 6,834,240	$ 7,327,963	7.2
Administrative Expense, as a Percentage of Total	3.0%	3.0%	
TOTAL	$231,515,795	$251,270,554	8.5

[1] Includes $334,197 for out-of-province hospital out-patient and diagnostic services transferred to the Department of Health in 1986–87, and $719 paid to physicians assisting at specified dental surgical procedures.

Table 2. Physicians' Services Payment and Utilization Summary: Fiscal 1986–87 Compared with Fiscal 1985–86

	1985–86	1986–87[1]	Percentage Change
Payment Summary			
Fee-for-Service Payments for Physicians' Services Rendered in Nova Scotia	$158,107,392	$168,815,482	6.8
Physicians' Services Rendered Outside Nova Scotia	2,329,412	2,539,474	9.0
TOTAL FEE-FOR-SERVICE PAYMENTS	$160,436,804	$171,354,956	6.8
Salaried Physicians	6,383,718	7,158,811	12.1
Total Payments for Physicians' Services	$166,820,522	$178,513,767	7.0
Utilization Summary			
Persons Insured[2]	856,200	861,400	0.6
Persons Receiving Insured Services (Beneficiaries)	767,787	778,700	1.4
Percent of Persons Insured	89.7	90.4	
Services Rendered			
Services Per Insured[3]	7.47	7.73	3.5
Expenditure Per Insured[4]	$194.84	$207.24	6.4
Services Per Beneficiary[3]	8.33	8.55	2.6
Expenditure Per Beneficiary[4]	$217.27	$229.25	5.5

[1] Of the total for physicians' services, $334,197 for out-of-province, out-patient and diagnostic services was charged to the Department of Health in 1986–87.

[2] The 1986 census has indicated that Statistics Canada's population estimates for the years since the 1981 census have overstated population growth rates. The 1986–87 population figure is based on 1986 census data. The insured population figure for 1985–86 has been revised downward. These figures could possibly be revised further as soon as population estimates are published by Statistics Canada.

Estimates of insured population as of October 1 are 856,200 for 1985–86 and 861,400 for 1986–87. These figures exclude 13,600 individuals in the Armed Forces or R.C.M.P., for each of the fiscal years, 1985–86 and 1986–87.

[3] Excludes services performed by physicians under salary arrangement.

[4] Includes payments for salaried physicians' services.

Table 3. Physicians' Services
Amount Paid by Type of Service

	12 Months Ended March 31, 1986		12 Months Ended March 31, 1987		
	Amount Paid	% Of Total	Amount Paid	% Of Total	% Change Amount Paid
Consultations	$ 20,751,862	12.9	$ 21,427,720	12.5	3.3
Office Visits	52,746,752	32.9	57,387,455	33.4	8.9
Home Visits	4,369,775	2.7	4,791,714	2.8	9.7
Hospital Visits	10,426,566	6.5	10,966,373	6.4	5.2
Emergency & Outpatient Dept. Visits	9,107,489	5.7	9,755,349	5.7	7.1
Intensive Care	1,524,587	1.0	1,817,375	1.1	19.2
Psychiatric Services	7,287,136	4.5	8,343,030	4.9	14.5
Sub-Total	$106,214,167	66.2	$114,489,016	66.8	7.8
Eye Examinations	2,067,412	1.3	2,203,020	1.3	6.6
Other Diagnostic & Therapeutic	10,075,013	6.3	10,934,269	6.4	8.5
Sub-Total	$ 12,142,425	7.6	$ 13,137,289	7.7	8.2
Obstetrical Care	$ 5,260,552	3.3	$ 5,404,283	3.2	2.7
Major Surgery	17,160,903	10.7	18,152,448	10.6	5.8
Minor Surgery	5,169,493	3.2	5,294,874	3.1	2.4
Surgical Assist	1,578,568	1.0	1,629,825	0.9	3.3
Anaesthesia	8,646,037	5.4	9,097,006	5.3	5.2
Sub-Total	$ 32,555,001	20.3	$ 34,174,153	19.9	5.0
All Other Services[1]	4,264,659	2.6	4,150,215	2.4	−2.7
TOTAL	$160,436,804	100.0	$171,354,956	100.0	6.8

[1] i.e., Amounts paid for out-of-province services, independent consideration, detention fees and group immunization.

Table 4. Physicians' Services Fee-for-Service Payments
Number of Physicians by Specialty and Payment Range[1] (1985–86 Compared with 1986–87

	Under $25,000		$25,000 –49,999		$50,000 –99,999		$100,000 –149,999		$150,000 –199,000	
	1986[2]	1987[2]	1986	1987	1986	1987	1986	1987	1986	1987
Anaesthesia	8	5	4	4	20	17	25	34	12	12
Cardiovascular Surgery	–	–	–	–	–	–	–	–	1	1
Dermatology	1	3	–	1	2	3	2	1	–	1
General Practice	223	237	106	87	191	175	249	258	109	143
General Surgery	16	11	10	8	6	11	17	13	26	21
Internal Medicine	29	37	20	13	26	37	16	13	16	13
Neurology	2	2	–	1	4	4	1	1	1	1
Neurosurgery	–	–	–	–	–	–	1	2	3	2
Obstetrics & Gynaecology	3	2	–	3	8	7	8	8	13	11
Ophthalmology	1	4	3	–	2	1	3	2	6	6
Ophthalmology & Otolaryngology	1	1	–	1	1	1	1	–	–	–
Otolaryngology	4	2	1	1	1	1	2	2	1	1
Orthopaedic Surgery	1	2	–	1	–	2	5	2	1	3
Paediatrics	14	13	11	9	20	20	10	12	6	7
Physical Medicine	–	3	–	–	2	1	2	2	–	–
Plastic Surgery	–	1	–	–	–	–	1	–	2	2
Psychiatry	22	25	9	10	25	22	14	17	5	4
Radiology	57	59	9	9	2	5	1	–	1	1
Thoracic Surgery	1	7	–	–	1	–	1	–	1	–
Urology	1	–	2	1	1	2	4	1	4	6
Other Specialties[3]	14	19	–	–	–	–	–	–	–	–
TOTAL	398	433	175	149	312	309	363	368	208	235

[1] This table provides data on MSI fee-for-service payments only.
[2] 1986 refers to the fiscal year 1985–86 and 1987 refers to the fiscal year 1986–87.
[3] Includes Pathology (13) and Public Health (1) in 1986 and Pathology (18) and Public Health (1) in 1987.

Table 4. (continued).
Number of Physicians by Specialty and Payment Range

	$200,000 –249,999		$250,000 –299,999		Over $300,000		Total	
	1986	1987	1986	1987	1986	1987	1986	1987
Anaesthesia	1	—	—	—	—	—	70	72
Cardiovascular Surgery	1	2	2	1	3	3	7	7
Dermatology	—	—	1	1	2	2	8	12
General Practice	39	33	4	13	5	5	926	951
General Surgery	12	19	5	9	3	2	95	94
Internal Medicine	5	9	4	5	6	7	122	133
Neurology	—	—	—	—	1	1	9	10
Neurosurgery	1	2	—	—	—	—	5	6
Obstetrics & Gynaecology	5	6	1	—	4	5	42	42
Ophthalmology	7	9	3	4	9	8	34	34
Ophthalmology & Otolaryngology	—	—	—	—	—	—	3	3
Otolaryngology	6	3	3	5	4	5	22	20
Orthopaedic Surgery	4	1	4	6	2	3	17	20
Paediatrics	1	1	—	—	—	—	62	62
Physical Medicine	1	1	1	1	—	—	6	8
Plastic Surgery	3	3	—	1	1	1	7	8
Psychiatry	1	2	—	1	—	—	76	81
Radiology	—	—	—	—	—	—	70	74
Thoracic Surgery	2	—	1	—	—	—	7	7
Urology	2	3	2	3	2	1	18	17
Other Specialties	—	—	—	—	—	—	14	19
TOTAL	91	93	31	50	42	43	1,620	1,680

Table 5. Dental Services: Payment and Utilization Summary

Payment Summary	1985–86	1986–87
Children's Dental & Dental Surgical[1]		
Services in Nova Scotia	$14,059,618	$14,004,147
Services Outside Nova Scotia	13,107	13,041
TOTAL	$14,072,725	$14,017,188
Special Dental Programs[2]	155,413	244,652
TOTAL DENTAL PAYMENTS	$14,228,138	$14,261,840

Utilization Summary	Dental Surgical		Children's Dental	
	1985–86	1986–87	1985–86	1986–87
Services Rendered	29,235	31,932	525,877	521,044
Amount Paid	$2,158,018	$2,336,770	$11,914,707	$11,680,418
Persons Insured	856,200	861,400	206,200	204,100
Persons Receiving Insured Services (Beneficiaries)	9,580	10,295	125,275	127,325
Percent of Persons Insured	1.1%	1.2%	60.8%	62.4%
Services Per Insured Person	.03	.04	2.55	2.55
Paid Per Insured Person	$2.52	$2.71	$57.78	$57.23
Services Per Beneficiary	3.05	3.10	4.20	4.09
Paid Per Beneficiary	$225.26	$226.98	$95.11	$91.74

[1] The Children's Dental Plan covers all children under 16 years of age.

[2] Special Dental Programs include persons who have a cleft palate; in-hospital services to persons who are severely mentally retarded; and children at the Halifax School for the Blind born prior to 1967. Amounts paid were

	1985–86	1986–87
Cleft Palate	$129,198	$213,314
Mental Retardation	25,882	30,717
School for The Blind	333	621

Table 6. Dental Services:
Payments to Dentists, by Payment Range
1985–86 and 1986–87

	Less Than $5,000		$5,000 –9,999		$10,000 –14,999		$15,000 –19,999		$20,000 –29,999	
	86	87	86	87	86	87	86	87	86	87
Children's Dental										
General Practitioners	48	42	24	30	26	25	25	29	34	34
Specialists	27	29	3	1	1	2	—	1	3	2
TOTAL	75	71	27	31	27	27	25	30	37	36
Dental Surgical										
General Practitioners	42	45	2	2	4	3	1	1	—	—
Specialists	5	6	—	—	1	—	—	1	—	—
TOTAL	47	51	2	2	5	3	1	2	—	—

Table 6. Dental Services ((continued)): Payments to Dentists, by Payment Range 1985–86 and 1986–87

	$30,000 –39,999		$40,000 –49,999		$50,000 –99,999		$100,000 And Over		Total	
	86	87	86	87	86	87	86	87	86	87
Children's Dental										
General Practitioners	31	34	19	25	81	83	13	9	301	311
Specialists	—	—	—	1	1	1	2	2	37	39
TOTAL	31	34	19	26	82	84	15	11	338	350
Dental Surgical										
General Practitioners	—	—	—	—	—	—	—	—	49	51
Specialists	1	—	—	—	1	—	9	10	17	17
TOTAL	1	—	—	—	1	—	9	10	66	68

Table 7. Special Dental Programs: Payment and Utilization Summary April 1, 1986 to March 31, 1987

	Number of Beneficiaries	Number of Services	Amount Paid
Cleft Palate	415	2,787	$213,314
Mentally Retarded	102	780	30,717
Halifax School for the Blind	9	29	621

Table 8. Optometric Services: Payment and Utilization Summary

	1985–86	1986–87	Percentage Change
Payment Summary			
Payments to Optometrists in Nova Scotia	$2,726,580	$3,219,866	18.1
Out-of-Province	8,824	12,227	38.6
TOTAL	$2,735,404	$3,232,093	18.2
Utilization Summary			
Services Rendered	107,025	118,618	10.8
Persons Insured[1]	856,200	861,400	0.6
Persons Receiving Services (Beneficiaries)	103,170	114,751	11.2
Percentage of Persons Insured	12.1	13.3	
Services Per 1,000 Insured	125	138	10.4
Expenditure Per 1,000 Insured	$3,195	$3,752	17.4
Services Per 1,000 Beneficiaries	1,037	1,034	−0.3
Expenditure Per 1,00 Beneficiaries	$26,514	$28,166	6.2

[1] The 1986 census has indicated that Statistics Canada's population estimates for the years since the 1981 census have overstated population growth rates. The 1986–87 population figure is based on 1986 census data. The insured population figure for 1985–86 has been revised downward. These figures could possibly be revised further as soon as population estimates are published by Statistics Canada.

Estimates of insured population as of October 1 are 859,200 for 1985–86 and 861,400 for 1986–87. These figures exclude 13,600 individuals in the Armed Forces or R.C.M.P. for each of the fiscal years, 1985–86 and 1986–87.

Table 9. Optometric Services: Number of Optometrists Paid, by Payment Range 1985–86 and 1986–87

	Less Than $20,000		$20,000 –39,999		$40,000 –59,999		$60,000 –79,999		$80,000 And Over		Total	
Location	**86**	**87**	**86**	**87**	**86**	**87**	**86**	**87**	**86**	**87**	**86**	**87**
Urban	5	4	3	3	9	10	7	5	2	7	26	29
Rural	6	5	4	6	5	6	8	5	4	7	27	29
TOTAL	11	9	7	9	14	16	15	10	6	14	53	58

Table 10. Pharmacare Services: Payment and Utilization Summary April 1, 1986 to March 31, 1987

	1985–86	1986–87	Percentage Change
Payment Summary			
Payments for Prescriptions Dispensed			
by participating pharmacies	$38,909,037	$45,623,664	17.3
by other providers	508,896	561,167	10.3
by providers outside Nova Scotia	58,152	65,491	12.6
	$39,476,085	$46,250,322	17.2
Homes for Special Care[1]	555,307	637,649	14.8
TOTAL	$40,031,392	$46,887,971	17.1
Utilization Summary			
Persons Insured	103,000	105,000	1.9
Persons Receiving Insured Services (Beneficiaries)[2]	94,985	97,837	3.0
Percent of Persons Insured	92.2	93.2	
Prescriptions Dispensed	2,133,621	2,299,255	7.8
Prescriptions Per Insured	20.7	21.9	5.8
Expenditure Per Insured	$383.26	$440.48	14.9
Prescriptions Per Beneficiary[2]	22.5	23.5	4.4
Expenditure Per Beneficiary[2]	$415.60	$472.73	13.8

[1] Special payment arrangements are in effect for residents of certain Homes for Special Care. These include reimbursement of drug costs, and payments for pharmacy services on a sessional or capitation fee basis.

[2] Excludes persons residing in Homes for Special Care.

Table 11. Cystic Fibrosis and Diabetes Insipidus Programs: Payment and Utilization Summary April 1, 1986 to March 31, 1987

	1985–86	1986–87
Payment Summary		
Cystic Fibrosis		
Drugs	$311,552	$407,876
Equipment	5,083	11,553
TOTAL	$316,635	$419,429
Diabetes Insipidus	$ 42,512	$ 44,606
Cancer Society	$ 55,467	$ 85,849
Utilization Summary		
Cystic Fibrosis		
Insured Persons	148	130
Expenditure Per Insured Person	$ 2,139	$ 3,226
Diabetes Insipidus		
Insured Persons	49	52
Expenditure Per Insured Person	$ 868	$ 858

Table 12. Prosthetic Services: Payment and Utilization Summary April 1, 1986 to March 31, 1987

	1985–86	1986–87
Payment Summary		
Artificial Limbs	$377,734	$460,548
Maxillofacial Prosthodontics[1]	45,281	7,632
Ocular Prosthetics[1]	28,470	28,856
TOTAL	$451,485	$497,036
Utilization Summary		
Insured Persons		
Artificial Limbs	409	394
Maxillofacial Prosthodontics[1]	65	22
Ocular Prosthetics[1]	99	116
Expenditure Per Insured		
Artificial Limbs	$ 924	$ 1,169
Maxillofacial Prosthodontics[1]	697	347
Ocular Prosthetics[1]	288	249

[1] Payments for Maxillofacial Prosthodontics and Ocular Prosthetics began during fiscal 1984–85.